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TSS QAS REVIEW SHEET *10685-911*

Application Number: **Cluster Date:**   **TSS QAS:**
Review Type: Issue Revision   **Tech Center:**   **LIE:**
Total applicable points: 0   **Total points earned:** 0   **Error Score:** N/A

JACKET / ISSUE CLASSIFICATION SHEET

Issue Processing

Primary Examiner box complete   ○ Yes ○ No ○ N/A 7

Issuing Classification complete   ○ Yes ○ No ○ N/A 13

PTO-892/1449

Examiner's initials or cross-through lines supplied for each item
cited by applicant   ○ Yes ○ No ○ N/A 13

Date(s) supplied/complete on all PTO-1449/892 sheets (Month
and year required)   ○ Yes ○ No ○ N/A 13

SPECIFICATION

Brief description of drawings includes description of each figure in
drawings   ○ Yes ○ No ○ N/A 13

Continuing data mentioned in 1st paragraph (can be an insert)   ○ Yes ○ No ○ N/A 13

CLAIMS

Claims listed on Notice of Allowability match allowed claims
and/or index of claims   ○ Yes ○ No ○ N/A 13

Claims correctly numbered in index. (No duplicate or missing claim
numbers. And no incorrect dependencies)   ○ Yes ○ No ○ N/A 13

One sheet of complete claims   ○ Yes ○ No ○ N/A 9

RAM FEES

Applicable Fees   **Amount Actually Charged**   **Amount That Should Have Been Charged**

☐ Examiner's amendment

CRFE-COMPUTER READABLE FORM

		15

If necessary (bilogical sequence listing)   ○ Yes ○ No ○ N/A 15

TITLE (design only)

The title of the application matches the claim.   ○ Yes ○ No ○ N/A 13

Comments: ○

Paragraph Font Size Color   B I U abc x² x₂